

Form Number 2

STATE OF INDIANA) IN THE _____ SUPERIOR/CIRCUIT COURT
) SS:
COUNTY OF _____) CASE NO. _____

Petitioner,

V.

Respondent.

VERIFIED MOTION FOR CONTINUANCE

Comes now _____, and states the following:

1. This matter is scheduled for hearing on _____;

2. I need additional time because _____;
_____;

3. I request a continuance for _____.

4. I contacted _____ on _____, and they _____ to my
continuance request.

WHEREFORE, I respectfully request a continuance of this hearing, and for all other just and proper relief.
I affirm under the penalties of perjury that the foregoing representations are true.

Signature

Print your name

Mailing address

Town, State and Zip Code

Telephone number, with area code

CERTIFICATE OF SERVICE

I hereby certify that I sent a copy of this Petition by first class mail to the opposing attorney, or the
opposing party if the opposing party is not represented by an attorney, on _____.

Signature

Print your name